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PTO/SB/83 (11-96)

Approved for use through 6/30/99. OMB 0651-0035

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/133615
Filing Date	08/13/98
First Named Inventor	James Johnson
Group Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	10172-9013-012

O I P E
JAN 07 1999
SC 255
To: Assistant Commissioner for Patents
Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified application.

The reasons for this request are:

BUSINESS WAS TRANSFERRED TO ILLINOIS TOOL WORKS, INC.

- The correspondence address is NOT affected by this withdrawal.
- Change the correspondence address and direct all future correspondence to:

CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number	<input type="text"/>	→	Place Customer Number Bar Code Label here
OR			

<input type="checkbox"/> Firm or Individual Name	ILLINOIS TOOL WORKS, INC.		
Address	MR. THOMAS BUCKMAN		
Address	3600 W. LAKE AVENUE		
City	GLENVIEW	State	IL
Country	COOK		
Telephone	847-724-7500	Fax	

This request is enclosed in triplicate.

Name	ROBERT S. BEISER OF MICHAEL, BEST & FRIEDRICH		
Signature	<i>Robert S. Beiser</i>		
Date	DECEMBER 28, 1998		

NOTE: Withdrawal is effective when approved rather than when received.

Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.